Clarke shows considerable antipathy toward the very people on whom his innovation would have the most immediate and widespread effect --the inmates of the his own Asylum, and the chronic insane in particular. He does not oppose but reinforces popular prejudice against the Asylum and its inmates, commisserating with people over "the stigma of having been sent to an Asylum ... the hardships of being forced to associate with the chronic insane" (2). Not everyone believed Clarke's assurances, that the clinic would not "militate against the usefulness of the institutions now in existence," or that "it would simply assist them in developing the scientific side of their work" (14).

In 1907 Clarke travelled to Europe as part of a Commission authorized to recommend, as the Commission Report of 1907 put it, "a policy to be followed in making new departures as to the State treatment and care of the insane" (2).[civ] The "problem" is initially "dissolved" into what are seen as its two "divisions," "treatment" of the acutely insane, and "care of the chronic insane." The shift from "treatment" to "care" seems crucial, a portent of problems to come. "Chronic" and "acute" are euphemisms for asylum and clinic.[cv] The commissioners' discovery, "the absolute impossibility of combining Hospitals and Asylums to accomplish the highest and best kind of scientific work" (3) -- seems to have been a foregone conclusion. The issue is not just the greater degree of "individual care" essential to the cure of insanity, but the prejudice whereby "the developing case will shun the Asylum almost instinctively" (3). Like Clarke above, the commissioners do not oppose prejudice or redress the conditions that contribute to it, but sympathize with the prejudiced. Most impressed by Emil Kraepelin's clinic at Munich, they quote him extensively on the status of clinic vis a vis asylum -- the "estrangement" of asylum doctors from developments in neurology, the "retarding influence" of the asylum, the "isolation" of the asylum from "a large province" of nervous diseases outside it, waiting to be "conquered," the afflicted patients analogous to indigenous peoples whom the clinicians "claim with a perfect right" (9), etc.

With characteristic brusqueness Clarke acknowledges the stigmatization of chronic patients, only to dismiss the concern: "Of course this feeling should not exist, but it is present, and one would be callous indeed if he did not sympathize deeply with those who have it" (1908, 5). A principal recommendation for the psychiatric clinic is its accommodation of middle-class prejudice -- what Clarke means by the "asylum bugaboo" (1908, 4) -- an accommodation that would later help to perpetuate another "accommodation,"